Revision: HCFA-PM-92 -1 (MB) FEBRUARY 1992 ATTACHMENT 2.2-A Page 23

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

	State:	FLORIDA		
	COVERAGE	AND CONDITIONS OF ELIG	IBILITY	
Citation(s)		Groups Covered		
1902(a)(47) and 1920 of the Act	в.	(Continued) X 17. Pregnant wome "qualified property (2) (2) (3)	Than the Medically Needy en who are determined by a rovider" (as defined in of the Act) based on information, to meet the	
,		highest appl specified in 2.6-A and are presumptivel	icable income criteria this plan under ATTACHMENT e therefore determined to be y eligible during a presumptive period in accordance with §1920	

of the Act.

TN No. 92-23
Supersedes Approval Date Effective Date 4/1/92
TN No. 91-39

		State:	FLORIDA
Citation			Groups Covered
	_		The following reasonable classifications of children described above who are under age 19 with family income at or below the percent of the Federal poverty level specified for the classification:
1902(e)(12) of the Act	<u>X</u>	20.	A child who has attained the age of 5 and who is under age 19 who has been determined eligible is deemed to be eligible for a total of 6 months regardless of changes in circumstances other than attainment of the maximum age stated above.
	<u>X</u>	20a.	A child under age 5 who has been determined eligible is deemed to be eligible for a total of 12 months regardless of changes in circumstances other than attainment of the maximum age stated above.
)2 of the Act		21.	Children under age 19 who are determined by a "qualified entity" (as defined in s. 1920A(b)(3)(A)) based on preliminary information, to meet the highest applicable income criteria specified in this plan.
			The presumptive eligibility period begins on the day that the determination is made. If an application for Medicaid is filed on the child's behalf by the last day of the following month in which the determination of presumptive eligibility was made, the presumptive period ends on the day that the State agency makes a determination of eligibility based on that application. If an application is not filed on the child's behalf by the last day of the month following the month the determination of presumptive eligibility was made, the presumptive period ends on that last day.
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I No. <u>98-22</u> supersedes TN No. <u>98-11</u>

Approval Date 6 10 9

Effective 1/1/99

Citation	Groups	Covered	
		The following reasonable classifications of children described above who are under age 19 with family income at or below the percent of the Federal poverty level specified for the classification:	
1902(e) (12) of the Act	_ X 20.	A child under age 19 (not to exceed age 19) who has been determined eligible is deemed to be eligible for a total of 6 months (not to exceed 12 months) regardless of changes in circumstances other than attainment of the maximum age stated above.	
1920A of the Act	21.	Children under age 19 who are determined by a "qualified entity" (as defined in s. 1920A (b) (3) (A)) based on preliminary information, to meet the highest applicable income criteria specified in this plan.	
		The presumptive eligibility period begins on the day that the determination is made. If an application for Medicaid is filed on the child's behalf by the last day of the following month in which the determination of presumptive eligibility was made, the presumptive period ends on the day that the State agency makes a determination of eligibility based on that application. If an application is not filed on the child's behalf by the last day of the month following the month the determination of presumptive eligibility was made, the presumptive period ends on	

that last day.

TN No. 98-11 Supersedes TN No. 97-24

Approval 8 12 98

Effective 7/1/98

Revision: HCFA-PM-91-4 (BPD)

AUGUST 1991

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OMB NO.: 0938-

State: _____ FLORIDA

Agency* Citation(s)

Groups Covered

C. Optional Coverage of the Medically Needy

42 CFR 435.301

This plan includes the medically needy.

No.

 $/\overline{X/}$ Yes. This plan covers:

1. Pregnant women who, except for income and/or resources, would be eligible as categorically needy under title XIX of the Act.

1902(e) of the Act

2. Women who, while pregnant, were eligible for and have applied for Medicaid and receive Medicaid as medically needy under the approved State plan on the date the pregnancy ends. These women continue to be eligible, as though they were pregnant, for all pregnancy-related and postpartum services under the plan for a 60-day period, beginning with the date the pregnancy ends, and any remaining days in the month in which the 60th day falls.

1902(a)(10) (C)(ii)(I)of the Act

3. Individuals under age 18 who, but for income and/or resources, would be eligible under section 1902(a)(10)(A)(i) of the Act.

Approval Date SEP 8 1992 TN No. 91-39 Supersedes TN No. ___NEW

Effective Date 10/1/91

HCFA ID: 7983E

HCFA-PM-91-4 Revision: (BPD) ATTACHMENT 2.2-A AUGUST 1991 Page 25 OMB NO.: 0938-State: ____ FLORIDA Agency* Citation(s) Groups Covered C. Optional Coverage of Medically Needy (Continued) 4. Newborn children born on or after 1902(e)(4) of October 1, 1984 to a woman who is eligible the Act as medically needy and is receiving Medicaid on the date of the child's birth. The child is deemed to have applied and been found eligible for Medicaid on the date of birth and remains eligible for one year so long as the woman remains eligible, or would remain eligible if she were pregnant, and the child is a member of the woman's household. $5.\overline{X}$ a. Financially eligible individuals who are not 42 CFR 435.308 described in section C.3. above and who are under the age of--_X_ 21 20 19 18 or under age 19 who are full-time students in a secondary school or in the equivalent level of vocational or technical training $\sqrt{X/}$ b. Reasonable classifications of financially eligible individuals under the ages of 21, 20, 19, or 18 as specified below: Individuals for whom public agencies are X_ (1)assuming full or partial financial

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(a)

(b)

X

X

responsibility and who are:

the age of 21).

of 21).

In foster homes (and are under the age

In private institutions (and are under

Revision: HCFA-PM-91-4 ATTACHMENT 2.2-A (BPD) AUGUST 1991 Page 25a CMB NO.: 0938-FLORIDA State: ____ Groups Covered Agency * Citation(s) C. Optional Coverage of Medically Needy (Continued) <u>_X</u>_ In addition to the group under (C) b.(1)(a) and (b), individuals placed in foster homes or private institutions by private, nonprofit agencies (and are under the age of 21). <u>X</u> (2) Individuals in adoptions subsidized in full or part by a public agency (who are under the age of 18). Individuals in NFs (who are under the age (3) of ______). NF services are provided under this plan. In addition to the group under (b)(3), (4)individuals in ICFs/MR (who are under the age of _____). Individuals receiving active treatment as (5) inpatients in psychiatric facilities or programs (who are under the age of ____). Inpatient psychiatric services for individuals under age 21 are provided under this plan. X (6) Other defined groups (and ages), as specified in Supplement 1 of ATTACHMENT 2.2-A.

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Revised SubmissionFEB 11 (1992)

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State: _____FLORIDA

OMB NO.: 0938-

Agency* Citation(s)

Groups Covered

C. Optional Coverage of Medically Needy (Continued)

42 CFR 435.310 \sqrt{X} 6. Caretaker relatives.

42 CFR 435.320 $/\overline{X}$ 7. Aged individuals. and 435.330

42 CFR 435.322 /X/ 8. Blind individuals. and 435.330

42 CFR 435.324 $/\overline{X}$ 9. Disabled individuals. and 435.330

42 CFR 435.326 / 10. Individuals who would be ineligible if they were not enrolled in an HMO. Categorically needy individuals are covered under 42 CFR 435.212 and the same rules apply to medically needy individuals.

435.340

- 11. Blind and disabled individuals who:
 - a. Meet all current requirements for Medicaid eligibility except the blindness or disability criteria;
 - b. Were eligible as medically needy in December 1973 as blind or disabled; and
 - c. For each consecutive month after December 1973 continue to meet the December 1973 eligibility criteria.

Act

1906 of the 12. Individuals required to enroll in cost effective employer-based group health plans remain eligible for a minimum enrollment period of _____ months.

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